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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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06 MAR 15 PM 2:21  
TALLAHASSEE, FLORIDA

15002 CT RM  
MAR 15 2006

206-10089

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Quadrant Software, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Gary J. Langton  
(Name of Person)  
Quadrant Software, Inc.  
(Firm/Company)  
P.O. Box 200  
(Address)  
Mansfield, MA 02048  
(City/State and Zip code)

For further information concerning this matter, please call:

Charles Hutchinson at (508) 828-6222 x310  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Quadrant Software, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 04-3157753  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. \_\_\_\_\_ 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. June 1, 2005  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. \_\_\_\_\_  
(Principal office address) Mansfield  
P.O. Box 200 Taunton, MA 02048  
(Current mailing address)

8. Corporate Governance, Finance, and Marketing  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

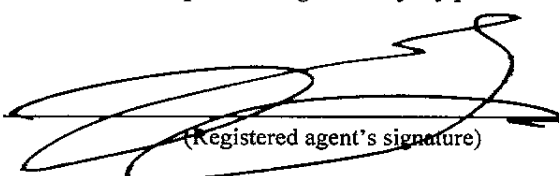
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Gary J. Langton  
Office Address: 6414 MacLaurin Dr.  
Tampa, Florida 33647  
(City) (Zip code)

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Gary J. Langton  
Address: 6414 MacLaurin Dr.  
Tampa, FL 33634

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Peter P. DePierro  
Address: 5 Maplewood Orchard  
Greenville, RI 02828

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Gary J. Langton  
Address: 6414 MacLaurin Dr.  
Tampa FL 33634

Vice President: Peter P. DePierro  
Address: 5 Maplewood Orchard  
Greenville, RI 02828

Secretary: Peter P. DePierro  
Address: 5 Maplewood Orchard, Greenville RI 02828

Treasurer: G  
Address: \_\_\_\_\_

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**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]  
(Signature of Director or Officer listed in number 12 of the application)

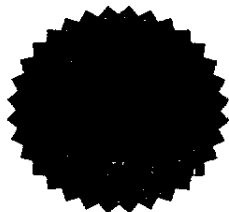
14. Gary J. Langton, CEO & Co-Founder  
(Typed or printed name and capacity of person signing application)

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QUADRANT SOFTWARE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2006.



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4537897

3802684 8300

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DATE: 02-21-06